# **Disability Data: An Inventory of Data Collection Systems**

California Department of Health Services

Office on Disability and Health

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Arnold Schwarzenegger Governor State of California

Kimberly Belshé Secretary Health and Human Services Agency

Sandra Shewry
Director
Department of Health Services





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#### Introduction

In survey research, disability is hard to define and hard to measure. The result is a stunning lack of research on a phenomenon that affects virtually everyone at some time in their life. For example, of Healthy People 2010's 467 objectives, 207 are pertaining to disability. However, half of these 207 objectives have no baseline data.

Healthy People 2010 Objective 6.1 states, "Include in the core of all relevant Healthy People 2010 surveillance instruments a standardized set of questions that identify 'people with disabilities." Disability is not a specific health outcome. For surveys, disability should be considered along with any other "demographic" such as age, sex, and income. A person's disability status tells us about the way they live their lives, and it correlates with many risks and practices relevant to public health. For these reasons, the Office on Disability and Health (ODH) supports including disability questions in all surveillance questionnaires.

To further this goal, ODH has put together Disability Data: An Inventory of Data Collection Systems. This inventory compares the methods of statewide and nationwide data collection systems with a disability-focused lens. This inventory tells how to access data and what type of disability-related information is found in each data collection system.

The inventory includes surveys ODH or our research collaborators have used in disability-related research. As stated in the California 2005-10 Strategic Plan for Promoting the Health of People with Disabilities, ODH hopes to expand upon this inventory to include other data collection systems throughout the state and nation, identify gaps in data collection, and make recommendations on how to improve data collection systems to better collect information on people with disabilities.

# **Data Collection Systems Descriptions**

The data collection systems included in this inventory are the following:

- California Behavioral Risk Factor Survey
- California Women's Health Survey
- California Health Interview Survey
- American Community Survey
- National Health Interview Survey
- Survey on Income and Program Participation

ODH will use this inventory to identify gaps in data collection around people with disabilities and areas for future research. ODH will continue to work with disability constituencies on making recommendations to these data collection system administrators on how to improve the survey information on disability.

California Behavioral Risk Factor Survey

Acronym: BRFSS

Contact: Holly Hoegh, Ph.D.

Survey Research Group 1700 Tribute Road, Suite 100

Sacramento, CA 95815

(916) 779-0334 holly@ccr.ca.gov

**Purpose:** To collect, analyze, and interpret state-specific behavioral risk factor data in order to plan, implement, and monitor public health programs.

**Description:** The Behavioral Risk Factor Surveillance System (BRFSS) is an annual population-based survey of households designed to monitor behaviors related to the leading causes of death. Currently, BRFSS extends to all 50 states, 3 territories, and the District of Columbia. Centers for Disease Control and Prevention (CDC) developed a standard core questionnaire for states to use to provide data that could be compared across states. The surveys also include optional modules and state-added questions.

**Data Collection:** Data are collected annually using random digit dialing via the computer-assisted telephone interview (CATI) system. The California BRFS includes about 200 questions and is administered to approximately 4,000 randomly chosen adults.

- Inclusion criteria: Non-institutionalized adults aged 18 years and older living in households with telephones.
- Exclusion criteria: Persons less than 18 years of age, living in institutions, or living in households without a telephone. Persons who speak a language other than English or Spanish, persons unable to sustain a lengthy telephone interview, or persons who are unable to participate in a telephone interview (e.g., persons with a cognitive disability or who are deaf or hard of hearing).

**Years Data Available:** 1984-2003

**Data Analysis:** The survey was designed to produce state estimates and allow for comparability between states. Estimates are weighted to adjust for multiple phone lines, non-response, non-coverage, number of adults in the household, age, sex, and race distributions. Statistical Analysis System (SAS) version 9.0 can be used to account for the complex sampling design.

**Query System:** An interactive query system is available on the national website where one can compare prevalence data to the nation or other states: http://apps.nccd.cdc.gov/brfss/

**Data Access:** The National BRFSS Survey Data are available in several different file formats (ZIP, SAS, EXE, RTF) and can be downloaded off the website. Data from the current survey year are usually available the following spring. Public use data sets for

California data are available through written request on agency letterhead. You will need to provide your name, company/organization name, email address, telephone number, and intended use/research of the survey literature.

# Strengths:

- Data can be used to track some Healthy People 2010 Goals and Objectives.
- Allows comparability between states and some regional estimates.

#### Limitations:

- BRFS excludes many people with disabilities: people living in institutions, people
  with disabilities so severe they cannot use the phone or cannot complete the
  survey, and people who are deaf or hard of hearing.
- The questions in the BRFSS do not identify people with cognitive impairments or with mental disabilities.

# **Disability-related features:**

- Disability status was assessed using CDC core questions\* which allows interstate comparisons and tracking of changes in prevalence.
- CDC offers an optional "Quality of Life" module\*\* that contains disability-related questions, such as assistance in performing activities and duration of limitation. The module was administered in California in 2001, 2002, and 2003.

### Other topics included (varies by year):

General health status, behavioral risk factors (e.g., smoking, alcohol use, diet, exercise), cancer screening, and chronic conditions (e.g., asthma, arthritis, diabetes).

Website: www.cdc.gov/brfss

#### \* Core questions used to identify the disability population starting in 2001:

- Are you limited in any way in any activities because of physical, mental, or emotional problems?
- Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?

## \*\* Quality of Life Module (optional, depends on the year):

- What is your major impairment or health problem?
- For how long have your activities been limited because of your major impairment or health problem?

- Because of any impairment or health problem, do you need the help of other persons with your PERSONAL CARE needs, such as eating, bathing, dressing, or getting around the house?
- Because of any impairment or health problem, do you need the help of other persons in handling your ROUTINE needs, such as everyday household chores, doing necessary business, shopping, or getting around for other purposes?

California Women's Health Survey

Acronym: CWHS

Contact: Marta Induni, Research Scientist I

Survey Research Group 1700 Tribute Road, Suite 100 Sacramento, CA 95815-4402

(916) 779-0336 marta@ccr.ca.gov

http://surveyresearchgroup.com/

**Purpose:** To provide knowledge about women's health to policy makers and health professionals, and to serve as a catalyst for innovative solutions that will impact the health of women in California.

**Description:** CWHS is an annual population-based telephone survey designed to gather information about health-related attitudes and behaviors and access to health care services among a sample of randomly selected adult women (over 18) in California.

**Data Collection:** Data are collected annually using random digit dialing via the CATI system. About 200 questions are answered by approximately 4,000 randomly chosen adult women.

- Inclusion criteria: Non-institutionalized women aged 18 years and older living in households with telephones in California who speak English or Spanish.
- Exclusion criteria: All men and women less than 18 years of age, living in institutions, or living in households without a telephone. Women who speak a language other than English or Spanish, women who are unable to sustain a lengthy telephone interview, and women who are unable to participate in a telephone interview (e.g., women with a cognitive disability or who are deaf or hard of hearing).

**Years Data Available:** 1997-2002. NOTE: 2003 data are currently available only for collaborating programs.

**Data Analysis:** The survey was designed to produce state estimates. Estimates are weighted to adjust for multiple phone lines, non-response, non-coverage, number of adult women in the household, age, and race distributions of the state of California based on 1990 Census. SAS can be used to account for the complex sampling design.

Query System: N/A

**Data Access:** To obtain a copy of the CWHS Survey Instrument, technical documentation, or datasets, contact the Survey Research Group at <a href="mailto:srg@ccr.ca.gov">srg@ccr.ca.gov</a>. Data for the current year are usually available the following spring for collaborators; two years for public use.

#### Strengths:

 The data can be used to track some Healthy People 2010 Goals and Objectives pertaining to women.

#### Limitations:

- CWHS excludes many women with disabilities: women living in institutions, women with disabilities so severe they cannot use the phone or cannot complete the survey, and women who are deaf or hard of hearing.
- The questions in CWHS do not identify women with cognitive impairments or with mental disabilities.

#### **Disability-related features:**

- In 2003, the BRFSS screener question on activity limitations was introduced as core. In 2005, the BRFSS screener question on adaptive equipment was introduced as core.\*
- In 2003 and 2004, questions were included that assessed barriers faced by women with disabilities in accessing health care and difficulties in going to school or work because of their limitation.

### Other topics included (varies by year):

Insurance status, access to health care, reproductive health, sexually transmitted diseases, maternal and child health, caregiving, stress, mental health, prenatal care, nutrition, hunger, domestic violence, disability and chronic pain, gynecologic cancers, breast cancer, HIV testing, breastfeeding, and aging women.

Website: http://www.dhs.cahwnet.gov/director/owh/survey.htm

## \* Questions used to identify the disability population (beginning in 2003):

- Are you limited in any way in any activities because of a physical, mental, or emotional problem?
- [If "yes"] And how long have your activities been limited?

#### Added in 2005:

Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone? **California Health Interview Survey** 

Acronym: CHIS

**Contact:** Laura Lund, M.A.

California Department of Health Services
Office of Health Information and Research

MS 5103, P.O. Box 997410 Sacramento, CA 95899-7410

(916) 552-8113 llund@dhs.ca.gov

**Purpose:** To provide health planners, policy makers, county governments, advocacy organizations, media, and communities a detailed picture of the health and health care needs of California's diverse population. To provide local-level information for most counties as well as information on specific ethnic sub-populations.

**Description:** CHIS is the largest statewide health survey, administered to randomly selected households throughout California, and collects health information on adults, adolescents, and children.

**Data Collection:** Data are collected every two years via random-digit dialing telephone interviews. The 2001 CHIS collected information on 55,000 households from every county in the state. The 2003 CHIS surveyed approximately 42,000 households. The 2005 CHIS is currently under development. In 2001, surveys were administered in six languages (e.g., English, Spanish, Chinese, Vietnamese, Korean, and Khmer) to gather information on various racial and ethnic groups. CHIS over-samples among rural counties and ethnic groups with small populations.

- Inclusion criteria: Non-institutionalized population living in households with telephones. CHIS interviews one sampled adult in each household. In households with children, CHIS interviews one adolescent age 12-17 and obtains information for one child under age 12 by interviewing the adult who is most knowledgeable about the child.
- Exclusion criteria: Persons living in institutions or in households without a telephone. Persons speaking a language other than what the survey is administered in, persons unable to sustain a lengthy telephone interview, or persons unable to participate in a telephone interview (e.g., persons with a cognitive disability or who are deaf or hard of hearing).

**Years Data Available:** 2001 (2003 will be available in the Fall 2004)

**Data Analysis:** The survey produces state and county prevalence estimates by household using software that accommodates the complex sampling design (e.g., SAS and SUDAAN). Estimates are adjusted for probability of selecting households, adults and children; multiple phone lines; and nonresponse.

Query System: <a href="http://www.chis.ucla.edu/main/default.asp">http://www.chis.ucla.edu/main/default.asp</a>

**Data Access:** Public use data files and supporting documentation are available on the CHIS website.

#### Strengths:

- Large sample size.
- Can measure some Healthy People 2010 Goals and Objectives.
- Provides county-level estimates for many counties.
- Provides estimates on hard to reach ethnic populations.
- Includes information on both adults and children in the household.

#### Limitations:

- CHIS excludes many people with disabilities: people living in institutions, people
  with disabilities so severe they cannot use the phone or cannot complete the
  survey, and people who are deaf or hard of hearing.
- The questions in CHIS do not identify people with cognitive impairments or with mental disabilities.

# **Disability-related features:**

- CHIS includes questions assessing legally blind status and work-related disability as a part of the core.\*
- The 2001 CHIS includes a series of questions on activity limitations.
- The 2003 CHIS includes questions\*\* on the use of adaptive equipment, assistance in performing Activities of Daily Living (personal care needs), and Instrumental Activities of Daily Living (routine needs).

#### Other topics included (varies by year):

 Health status, health conditions, health-related behaviors (e.g., cancer screening), health insurance coverage, access to and use of health care services, and the health and development of children and adolescents.

Website: www.chis.ucla.edu

### \* Core disability questions:

- Are you legally blind?
- Do you have a physical or mental impairment that has kept you from working for at least a year?

# \*\* Questions that identify the disability population in 2003:

- Do you now have any health problem that requires you to use special equipment such as a cane, a wheelchair, a special bed, or special phone?
- Do you need special equipment or someone to help you with eating, dressing, bathing, getting out of chairs, moving around the house, or using the toilet because of a health problem or condition?
- [If "yes"] Do you need special equipment or the help of another person for:
  - Walking or getting around inside the house?
  - Getting in or out of bed or chairs?
  - Bathing or showering?
  - Dressing?
  - Eating?
  - Using the toilet?
- For household chores, such as cooking, shopping, managing money, or cleaning, do you need special equipment or someone to help you because of a health problem or condition?

#### **American Community Survey**

Acronym: ACS

Contact: <u>www.census.gov/acs/www</u>

**Purpose:** To provide annual estimates of information gathered every ten years in the decennial long form.

**Description:** ACS is an annual survey designed to provide estimates of demographic, housing, social, and economic characteristics every year for all states, as well as for all cities, counties, metropolitan areas, and population groups of 65,000 people or more.

**Data Collection:** Data are collected annually in a nationally representative sample of approximately 700,000 households from the civilian, noninstitutional population. Data are collected via three methods: 1) Mail (self-enumeration through mail-out/mail-back); 2) Telephone CATI; and 3) Personal visits (Computer Assisted Personal Interviewing).

Inclusion criteria: Noninstitutionalized, civilian population. All ages.

Exclusion criteria: Institutionalized population.

**Years Data Available: 2000-03** 

**Data Analysis:** An ACS goal is to provide data to the users within six months of the end of a collection or calendar year. When fully implemented, the ACS will provide direct estimates each year for states, populous counties, and other governmental units or population groups with a population of 65,000 or more. For smaller governmental units or population groups (those with a population of less than 65,000), it will take three to five years to produce estimates, which will be refreshed each year thereafter.

**Query System:** Detailed summary tables, tabular and narrative profiles, year-to-year change profiles, and ranking tables can be found on the census website under American Factfinder.

**Data Access:** Public Use Microdata Samples (PUMS) are available on the census website. The microdata file allows for two different units of analysis: housing unit and person. Within confidentiality constraints, the microdata file includes as many records as possible and shows the lowest level of geography possible. All products are available electronically, on CD-ROM, as well as on the census website.

#### Strengths:

- Sample sizes are large.
- Downloaded data can be used to calculate prevalence estimates for different demographic groups.
- Housing issues can be examined among people with disabilities.
- Sample includes disability information on people ages five and above.

#### Limitations:

Sample does not have information on other health indicators.

## **Disability-related features:**

 Questions assess sensory, physical, mental, self-care, and employment disabilities, but the classifications are not mutually exclusive.

# Other topics included (varies by year):

 Demographics (e.g., name, age, gender, education, employment, marital status, race/ethnicity, language spoken at home), housing, social, and economic characteristics (e.g., tenure, shelter costs, number of bedrooms, utilities, vehicles available).

Website: www.census.gov/acs/www

# Questions that identify the disability population:

- Does this person have any of the following long-lasting conditions:
  - Blindness, deafness, or a severe vision or hearing impairment?
  - A condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying?
- Because of a physical, mental, or emotional condition lasting six months or more, does this person have any difficulty doing any of the following activities:
  - Learning, remembering, or concentrating?
  - Dressing, bathing, or getting around inside the home?
  - (Answer if this person is 16 years old or over.) Going outside the home alone to shop or visit a doctor's office?
  - (Answer if this person is 16 years old or over.) Working at a job or business?

**National Health Interview Survey** 

Acronym: NHIS

Contact: Division of Health Interview Statistics
National Center for Health Statistics

Centers for Disease Control and Prevention

3311 Toledo Road, Room 2217

Hyattsville, MD 20782

(310) 458-4901 fax: (301) 458-4035 nhislist@cdc.gov

**Purpose:** To measure the health status of the civilian, noninstitutionalized U.S. population.

**Description:** The National Center for Health Statistics has conducted the NHIS each year since 1957. The core questionnaire obtains information on demographic characteristics of household members in addition to health-related topics. Every year, supplemental questionnaires usually change focus on emerging health issues such as HIV/AIDS infection, health insurance coverage, and Healthy People 2010 objectives.

**Data Collection:** NHIS is based on a sample of the entire civilian, noninstitutionalized U.S. population. Over the course of a year, approximately 50,000 households will be interviewed throughout all 50 states and the District of Columbia. Trained personnel of the U.S. Bureau of Census conduct personal household interviews at respondents homes. A household adult reports information for a randomly selected child less than 18 years of age in the Child Core questionnaire, and a randomly selected adult reports for him or herself in the Adult Core questionnaire.

- Inclusion criteria: Noninstitutionalized, civilian population, including college dorms. All ages.
- Exclusion criteria: Active military duty (but civilian household members are included). Persons whose usual residence is other than the selected household, persons who reside in institutions, and babies born during interview week.

Years Data Available: 1969-2001; 2002, and 2003 limited documentation only.

**Data Analysis:** The National Center for Health Statistics has based estimates of NHIS sampling error on the Taylor series linearization method, which takes into account sample design.

Query System: N/A

**Data Access:** Since 1969, public use data files have been prepared for each year of data collection. Public use microdata are available on the internet and on compact disc read-only memory (CD-ROM) for data collection years starting in 1987. To order a CD, call (301) 458-4636, or send an email to <a href="mailto:nchsquery@cdc.gov">nchsquery@cdc.gov</a>.

# Strengths:

- Sample sizes are large.
- Data includes information on both adults and children in the household.
- The Disability Supplement (1994-95) included extensive questions on disability status.

#### Limitations:

- The core is often answered by a knowledgeable proxy respondent for all household members.
- State estimates are not available.

#### **Disability-related features:**

- The NHIS disability definition refers to an activity limitation or long-term reduction (three months or more) in a person's capacity to perform the average kind or amount of activities for his or her age group as a result of a chronic condition.
- Age-related disability questions cover Activities of Daily Living for those age three and older, Instrumental Activities of Daily Living and work limitations for those age 18 and older, and limitations in walking and remembering for all age groups.
- In 1994-95, NHIS included a comprehensive supplement on disability conducted in two phases. Phase 1 obtains information on pathology/impairment, functional limitation, mental health, social disability, and access to medical and social services. Information was collected on 107,469 individuals, of whom 30,032 were children. Phase 2 is administered to household members who experience serious physical, cognitive, or psychological impairments; detailed information is obtained about work/employment history, limitations, and medical care and social services access and utilization.

#### Other topics included (varies by year):

Limitation of activity, injuries, health insurance, access to health care, health care
utilization, acute and chronic conditions, behaviors (e.g., tobacco, physical
activity), immunizations, and AIDS.

Website: <a href="http://www.cdc.gov/nchs/nhis.htm">http://www.cdc.gov/nchs/nhis.htm</a>

**Disability information:** http://www.cdc.gov/nchs/about/major/nhis\_dis/nhis\_dis.htm

**Survey of Income and Program Participation** 

Acronym: SIPP

**Contact:** Judith Eargle

**US** Department of Commerce

Census Bureau FOB Room 3377

Washington, DC 20233

(301) 763-3819

**Purpose:** To collect information on source and amount of income, labor force information, program participation and eligibility, and general demographic characteristics to measure the effectiveness of existing federal, state, and local programs. To estimate future costs and coverage for government programs, such as food stamps. To provide improved statistics on the distribution of income in the United States.

**Description:** SIPP, conducted by the U.S. Census Bureau since 1984, is a national household panel survey of the civilian, noninstitutional population. SIPP content is built around a "core" of labor force, program participation, and income questions designed to measure the economic situation of persons in the United States.

**Data Collection:** The survey design is a continuous series of national panels in which the same households are interviewed every four months for periods ranging from two and a half to four years. A cycle of four interviews covering the entire sample and using the same questionnaire is called a wave. The sample sizes range from approximately 14,000 to 36,700 interviewed households. For the 1984-1993 panels, a panel of households was introduced each year in February. A four-year panel was introduced in April 1996. A panel was introduced in February 2000 for two waves. A three-year 2001 panel was introduced in February 2001.

- Inclusion criteria: Noninstitutionalized, civilian population. All household members 15 years old and over are interviewed by self-response, if possible. Proxy response is permitted when household members are not available for interviewing.
- Exclusion criteria: Institutionalized population and those younger than 15 years old.

**Years Data Available:** 1984-1996

**Data Analysis:** SIPP produces national-level estimates for the U.S. resident population and subgroups. Although the SIPP design allows for both longitudinal and cross-sectional data analysis, SIPP is meant primarily to support longitudinal studies. SIPP's longitudinal features allow the analysis of changes in income, eligibility for, and participation in transfer programs, household and family composition, labor force behavior, and other associated events.

Query System: N/A

**Data Access:** The data are released periodically in cross-sectional, topical, and longitudinal reports. Public use files containing the core data on income recipiency and program participation are available currently for all waves of the 1984-1996 panels, and waves one through four longitudinal of the 2001 panel. Data can be downloaded off the internet at: <a href="http://www.sipp.census.gov/sipp/access.html">http://www.sipp.census.gov/sipp/access.html</a>.

## Strengths:

SIPP allows longitudinal data analysis.

#### Limitations:

State estimates are not available.

#### **Disability-related features:**

SIPP has asked questions measuring disability in 1990, 1991-92, 1993, 1994-95, and 1997.

#### Other topics included (varies by year):

SIPP core includes questions on household demographics (e.g., name, age, gender, education, employment, marital status, race/ethnicity). Additional topics, depending on the wave, include child care, wealth, program eligibility, child support, health, disability, utilization of health care services, home health care, long-term care, school enrollment, welfare reform, taxes, and financial.

Website: http://www.sipp.census.gov/sipp/

#### Questions that identify the disability population:

- SIPP identifies individuals as having a disability if they have experienced any of the following conditions for six or more months:
  - Used a wheelchair, cane, crutches, or walker;
  - Had difficulty performing one or more functional activities (seeing, hearing, speaking, lifting/carrying, using stairs, walking, or grasping small objects);
  - Had difficulty with one or more Activities of Daily Living, including getting around inside the home, getting in or out of bed or a chair, bathing, dressing, eating, and toileting;
  - Had difficulty with one or more Instrumental Activities of Daily Living, including going outside the home, keeping track of money and bills, preparing meals, doing light housework, taking prescription medicines in the right amount at the right time, and using the telephone (age 15 and older);

- Had one or more specified conditions (a learning disability, mental retardation or another developmental disability, Alzheimer's disease, or some other type of mental or emotional condition);
- Had any other mental or emotional condition that seriously interfered with everyday activities (frequently depressed or anxious, trouble getting along with others, trouble concentrating, or trouble coping with day-to-day stress);
- Had a condition that limited the ability to work around the house;
- If age 16-67, had a condition that made it difficult to work at a job or business;
   and
- Received federal benefits based on an inability to work.

# **Appendix: Comparison Tables**

Table 1. Type of Data Collection System

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Data System	Ongoing	Periodic Survey	Collection	Years data are available					
	Surveillance	System	Frequency						
	System	•							
BRFSS	X	X	Annual	1984-2003					
CWHS	X	X	Annual	1997-2002 for public use;					
				2003 is available for					
				collaborating programs					
CHIS	X	X	Biennial	2001, 2003, (in the Fall					
				2004)					
ACS	X	X	Annual	2000-02					
SIPP	X	X	2-4 year waves	1984-1996					
NHIS	Х	Х	Annual	1969-2002					

Table 2. Sources of Data

Data System	Telephone	In-Person	Self-
	Interview	Interview	Administered
			Questionnaire
BRFSS	X		
CWHS	X		
CHIS	Χ		
ACS	Χ	X	X
SIPP		X	
NHIS		X	

Source: Disability Data: An Inventory of Data Collection Systems Appendix: Comparison Tables 6/3/2005

Table 3. Demographics Obtained

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Data System	Age	Gender	Race	Ethnicity	Zip Code	Marital status	Sexual orientation	Employment	Income	Education	Disability
BRFSS	Χ	Χ	Χ	Χ	Χ	Х	Χ*	Χ	Χ	Χ	Χ
CWHS	Χ	Χ	Χ	Χ	Χ	Х	Χ*	Χ	Χ	Χ	Χ
CHIS	Χ	Χ	Χ	Χ	Χ	Х	Χ	Χ	Χ	Χ	Χ
ACS	Χ	Χ	Χ	Χ	Χ	X		Χ	Χ	Χ	Χ
SIPP	Χ	Χ	Χ	Χ	Χ	Χ	·	Χ	Χ	Χ	Χ
NHIS	Χ	Χ	Χ	Χ		Χ	·	Χ	Χ	Χ	Х

<sup>\*</sup>Not available all survey years.

**Table 4. Questions on Disability** 

Data System									ıl		
	Activity Limitation	Special Equipment	Assistance in Activities of Daily Living	Assistance in Instrumental Activities of Daily Living	Duration of disability	Major impairment	Functional limitation	Mental or Emotional	Cognitive or Developmental	Sensory	Secondary Conditions
BRFSS	Х	Х	Χ*	Χ*	Χ*	X*		Χ*			Χ*
CWHS	X*	Χ*			Χ*						
CHIS	Х	Х	Χ*	Χ*				X*		Χ*	
ACS	X		Χ	X	Χ				Χ	Χ	
SIPP		Χ	Χ	X	Χ		Χ	Χ	Χ		
NHIS	X	X			Χ	Χ	X			Χ	Χ*

<sup>\*</sup>Not available all survey years.

Source: Disability Data: An Inventory of Data Collection Systems Appendix: Comparison Tables

6/3/2005

Table 5. Types of Data Obtained

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Data System	Morbidity	Prevalence	General health status	"Quality of Life"	Health care utilization	Barriers to health care	Health insurance	Access to health care	Behavioral risk factors	Physical activity	Chronic health conditions
BRFSS	Χ	Χ	Х	X*	Χ*	X*	Χ		Х	Х	Χ
CWHS	Χ	Χ	Х	X*	Χ	Χ*	Χ	Χ	Х	Х	Χ
CHIS	Χ	Χ	Х	Χ*	Χ		Χ	Χ	Χ	Х	Χ
ACS		Χ									
SIPP	Χ	Χ						Χ			
NHIS	Χ	Χ			Χ		Χ	Χ	Χ	Χ	Χ

<sup>\*</sup>Not available all survey years.

Table 6. Geographic Level of Data Collection

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Data System	National	Regional	State	County	Zip code				
BRFSS			X						
CWHS			X						
CHIS			X	X	X				
ACS	X	X	X	X					
SIPP	X								
NHIS	Χ								

Source: Disability Data: An Inventory of Data Collection Systems Appendix: Comparison Tables 6/3/2005

**Table 7. Geographic Level of Prevalence Estimates** 

Data System	National	Regional	State	County	Zip code
BRFSS	X	X	Χ	X*	
CWHS			Χ		
CHIS			Х	X	X**
ACS	X	X	Х	X	
SIPP	X				
NHIS	X				

Source: Disability Data: An Inventory of Data Collection Systems Appendix: Comparison Tables

6/3/2005

<sup>\*</sup>Limited county estimates available

\*\*Available for Los Angeles and San Diego in 2001; available statewide in 2003